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ACTION EUR-12

INFO OCT-01 ISO-00 HEW-02 PM-04 L-03 NSC-05 SAJ-01 EB-07

SIL-01 LAB-04 CIAE-00 DODE-00 INR-07 NSAE-00 PA-01

USIA-06 PRS-01 SP-02 /057 W

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FM AMEMBASSY LONDON

TO SECSTATE WASHDC 7496

INFO AMEMBASSY BONN

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PASS HEW

E.O. 11652: N/A

TAGS: ELAB. SWEL, SOCI, UK

SUBJECT: HOPE TO RESOLVE DOCTORS' DISPUTE

REF: LONDON 18338

SUMMARY - AT LEAST ONE OF THE MYRIAD PROBLEMS FACED BY THE LABOR GOVERNMENT APPEARS ON THE VERGE OF A SOLUTION - THE CRISIS OVER PAYBEDS IN THE NATIONAL HEALTH SERVICE. LIMITED OFFICIAL USE

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A DISPUTE OVER PAY COULD ALSO BE RESOLVED SHORTLY AFTER

A VOTE ON A NEW OFFER IS COMPLETED. A COMPROMISE ARRANGEMENT ON PAYBEDS WOULD ALLOW FOR THEIR GRADUAL PHASING OUT, BUT GUARANTEE THAT PRIVATE PRACTICE WOULD BE PROTECTED IN THE UK. END SUMMARY.

- 1. LORD GOODMAN, WHO IS CLOSE TO HAROLD WILSON, HAS BEEN THE "GO-BETWEEN" SHUFFLING BACK AND FORTH BETWEEN BARBARA CASTLE'S DEPARTMENT OF SOCIAL SERVICES AND THE BRITISH MEDICAL ASSOCIATION. HE HAS HELPED FASHION A COMPROMISE ARRANGEMENT WHICH WOULD INVOLVE THE PHASING OUT OF 1,000 PAY BEDS WITHIN SIX MONTHS AFTER LEGISLATION WAS ENACTED TO SEPARATE PRIVATE PRACTICE FROM THE NATIONAL HEALTH SERVICE. AN INDEPENDENT BOARD TO BE ESTABLISHED WOULD SUPERVISE THE PHASING OUT OF THE REMAINING 4,000 BEDS. HOWEVER, IN RETURN FOR THIS GRADUAL PHASING OUT PROCESS, THE INDEPENDENT BOARD -- TO CONSIST OF TWO MEMBERS OF THE MEDICAL PPOFESSION ACCEPTABLE TO THE DOCTORS AND TWO MEMBERS APPOINTED AFTER CONSULTATION WITH OTHER NHS STAFF -- WOULD OPERATE UNDER CRITERIA WHICH WOULD AS-SURE THAT ALTERNATIVE PRIVATE PRACTICE FACILITIES WERE AVAILABLE.
- 2. DEREK STEVENSON, THE SECRETARY OF THE BRITISH MEDICAL ASSOCIATION, HAS CALLED A SPECIAL MEETING OF THE BMA COUNCIL ON FRIDAY, DECEMBER 19, TO CONSIDER THE COM-PROMISE, WHICH HE WELCOMED CAUTIOUSLY, ALTHOUGH HE SAID THAT THE DOCTORS WOULD CONTINUE TO OPPOSE LEGISLATION WHICH THEY FELT INTERFERED WITH THE RIGHTS OF INDIVI-DUAL PATIENTS AND THE FREEDOM OF THE MEDICAL PROFESSION. NORMAN FOWLER, THE OPPOSITION SPOKESMAN ON THE SOCIAL SERVICES. WAS NOT READY TO LET THE GOVERNMENT OFF THE HOOK. HE DECLARED: "AS IT STILL REMAINS HER (MRS. CASTLE'S) DECLARED AIM TO ABOLISH PAY BEDS. THE FACT THAT EXECUTION IS TO BE INDEPENDENT OR DELAYED IS IRRE-LEVANT." ONE OF THE KEY UNIONS WHICH HAD FULLY SUPPORTED MRS. CASTLE ON THE PAY-BED ISSUE, THE CONFEDERATION OF HEALTH SERVICE UNIONS, GAVE A MODIFIED ENDORSEMENT TO

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THE COMPROMISE.

3. AS FOR THE OTHER DISPUTE IN THE NATIONAL HEALTH SERVICE OVER JUNIOR DOCTORS' OVERTIME PAY, THERE IS SOME HOPE THAT THIS DISPUTE MAY ALSO BE RESOLVED AFTER A VOTE BY JUNIOR DOCTORS ON A REVISED OFFER FROM MRS. CASTLE IS COMPLETED. THE NEW OFFER WOULD ALLOW RATES TO BE COMPUTED FROM 40 INSTEAD OF 44 HOURS AND WOULD NOT BIND DOCTORS CONTRACTUALLY OR PROFESSIONALLY TO EXTRA WORK -- EXLIMITED OFFICIAL USE

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CEPT THAT DOCTORS STILL ACKNOWLEDGE THEIR OBLIGATION TO PERFORM EXTRA WORK IN EMERGENCY AND URGENT CASES. MOST IMPORTANTLY, UNDER THE NEW OFFER NO DOCTOR WOULD SUFFER A WAGE LOSS WHEREAS UNDER THE OLD OFFER AS MANY AS 6,000 DOCTORS WOULD HAVE RECEIVED AN EFFECTIVE WAGE REDUCTION. (THIS IS DUE TO THE FACT THAT MRS. CASTLE HAS AGREED TO AN INDEPENDENT AUDIT TO DETERMINE HOW MUCH MONEY IS AVAIL ABLE TO BE DIVIDED UP BY THE JUNIOR DOCTORS.—EXOECTED TO BE SIGNIFICANTLY MORE THAN ORIGINALLY INDICATED.)

4. COMMENT: IF AS IT IS NOW HOPED, BOTH DISPUTES WITHIN THE NATIONAL HEALTH SERVICE WILL BE SOON RESOLVED, MRS. CASTLE WILL NATURALLY BREATH CASTLE WILL NATURALLY BREATHE A SIGH OF RELIEF. THERE HAS BEEN CONSIDERABLE STRESS PLACED ON THE SERVICE AS A RESULT OF THE "EMERGENCY ONLY" POLICY OF THE DOCTORS. AT ONE POINT RECENTLY, THE DEATH OF A BABY WHO WAS TURNED AWAY BY SEVERAL HOSPITALS WHICH WERE NOT ABLE TO COPE WITH EMERGENCY TREATMENT FORCED THE DOCTORS TO IMPROVE THEIR "EMERGELCY ONLY" SERVICES TO HOSPITALS, BUT THE OVERALL OPERATION OF THE NHS REMAINS SEVERELY STRAINED IN MANY PARTS OF THE COUNTRY. HOWEVER, DESPITE THE HOPED FOR TERMINATIMN OF THESE DISPUTES THE DEEPER PROBLEMS OF ADMINISTRATIOL, ORGANIZATION AND FINANCING OF THE NHS WILL STILL REMAIN. A ROYAL COMMISSION, IN FACT, IS CUR-RENTLY EXAMINING THESE DEEPER PROBLEMS.

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